

Section 4: Emergency Management Measures

	Emergency Management	Numerator	Denominator	Data Sources in DoD/VA Systems	Type of Monitoring (Routine vs. Special Study)	Comments and Suggestions	Median	Average	Number Giving Item a Rating of 3 or below	Number Giving Item a Rating of 8 or above	Total Number Responding
	Process Measures										
48	% ER/urgent office visits for asthma with PEF or FEV1 for children 6 and over	Number of ER/urgent care visits for asthma for children 6 and over with documented PEF or FEV1	Number of ER/urgent care visits with asthma ICD9 code as primary reason for visit for patients 6 and over	ADS	Routine	- Might not be done if patient too sick to do.	6	6.5	3	4	11
49	% patients presenting to ER/urgent office visit with pulse oximetry	Number of ER/urgent care visits for asthma with documented pulse oximetry	Number of ER/urgent care visits with asthma ICD9 code as primary reason for visit	Chart audit	Special Study	- Adaptation of overprint form to include this would be helpful.	6	6.8	2	4	11
50	% patients presenting to ER/urgent office visit with FEV1 or PEF less than 70% of baseline who are given beta2-agonists	Number of visits in the denominator with documentation of beta2-agonists	Number of ER/urgent care visits with asthma ICD9 code as primary reason for visit with FEV1 or PEF less than 70% of baseline	Chart audit	Special Study		6	6.3	2	4	11
51	% patients given beta2-agonists in ER/urgent office visit with repeat FEV1 or PEF prior to discharge	Number of visits in the denominator with documentation of repeat FEV1 or PEF prior to discharge	Number of ER/urgent care visits with asthma ICD9 code as primary reason for visit with documentation of beta2-agonists	Chart audit	Special Study		8	7.2	1	6	11
52	% asthma hospitalizations followed up within 14 days with an outpatient visit	Number of asthma hospitalizations with ambulatory visit within 14 days of discharge date	Number of hospitalizations with asthma ICD9 code as primary reason for admission	CHCS/ADS	Routine		6	6.7	1	5	11
53	% patients presenting with acute asthma who are prescribed a course of oral corticosteroids				Routine		7.5	6.7	2	5	10
	Intermediate Outcomes										
54	% of patients revisiting ER within 6 months of index visit	Number of patients with second ER visit for asthma within 6 months of index visit	Number of ER patients with asthma ICD9 code as primary reason for visit with a prior ER visit for asthma from 6 to 18 months	SADR	Routine	- Measure can be collected centrally and be very sensitive	7.5	7.6	0	5	10
	Clinical Outcomes & Patient Satisfaction										
55	Mortality rate for patients with asthma	Number of asthma deaths in previous 12 months	Number of patients with asthma	CHCS	Routine	- Risk managers could be data source	7	6.4	1	3	11
56	Readmission rate within 12 months following asthma hospitalization	Number of hospitalizations in the denominator with a rehospitalization in the 12 months following date of discharge	Number of hospitalizations with asthma ICD9 code as discharge diagnosis for period 12 to 24 months ago	CHCS	Routine	- This is a high risk group which responds well to process changes.	8	7.5	1	7	11
57	% of patients with repeat ER/urgent office visit within 3 months of ER/urgent office visit	Number of visits in the denominator with another ER/urgent care visit within 3 months of visit date	Number of ER/urgent care visits with an asthma ICD9 code as discharge diagnosis for period 3 to 15 months ago	CHCS/ADS	Routine	- Replace "3 months" with "1 week"	8	6.9	2	6	11
58	Average hospital length of stay for asthma discharge	Total hospital days for the hospitalizations in the denominator	Number of hospitalizations with asthma ICD9 code as discharge diagnosis in previous 12 months	SADR	Routine	- Varies with coding conventions. - Too variable. - One suggested making it within one month. - The sicker asthmatics will still be getting admitted and length of stay may increase as the less sick ones with better out-patient control don't get admitted	3	4.1	6	1	11
59	Average number of routine visits for admitted patients during the 12 months after admission.			CHCS/ADS	Special		4	4.6	4	1	11